

Exemption # _____

CDCR Use Only

Attachment A

California Department of Corrections and Rehabilitation Exemption Request Form

Use this form to request an exemption from CALPIA for all products and/or services provided by CALPIA. This approved form or a formal exemption letter, constitutes CALPIA's written approval and must be maintained with the requesting department's purchasing documentation file as proof of exemption approval.



All **highlighted** information must be provided to complete your request.

Requesting Department Information

Agency: California Department of Corrections and Rehabilitation	Institution/Department (if applicable):
Approval required by either a Procurement and Contracting Officer (PCO) or Designee:	(Type names. Do not sign. Must be the same signature below)

Institution/Department Contact Information

Procurement Officer:	Street Address:
Signature:	
Telephone: FAX: E-mail:	Mailing Address:

Required Contract Information

Contractor Name:		
Contractor Address:		
Purchase Order Total:	Attach Copy of Purchase Order and include Number here: (or attach quote sheet)	Requested Delivery Date:
Provide a brief description of the items requested in this Exemption Request Including all goods and/or services the contractor will provide: (Attach additional information if necessary).		
Justification for Exemption Request: (To expedite your request, please provide an explanation as to why CALPIA cannot provide the goods and/or services needed) Attach additional information if necessary (i.e., catalog photocopy)		

Required Approvals

Procurement and Contracting Officer (PCO) or designee:	California Prison Industry Authority Sales Manager or designee:
_____ Signature	_____ Approved Denied
_____ Date	_____ Signature
	_____ Date

Submit completed form to: CDCR
Department, Procurement & Contracting Officer
By Fax (916) 255-6187